



A Consumer's Guide To
**FULL-JAW DENTAL
IMPLANT SOLUTIONS**



**Morris County
Dental Associates, LLC**
Experience, Compassion & Quality

Ira Goldberg, DDS, FAGD, DICOI

15 Commerce Blvd, Suite 201
Succasunna, NJ 07876

(973) 328-1225

WWW.MORRISCOUNTYDENTIST.COM

TABLE OF CONTENTS

Introduction & Definition

Intended Audience

The Internet

What Qualifies Dr. Goldberg To Write This e-Book

The American Board of Oral Implantology / Implant Dentistry

Testimonials

Dental Implants Are Not A Specialty

NJ State Board of Dentistry Advertising Regulations

Full Jaw Dental Implant Solutions (FJDIS): What On Earth Are You Talking About?

The Process Explained

Is There Pain?

Mary's Story

Bone Grafting

Material Options

Advantages, Disadvantages, & Alternatives

Maintenance & Homecare: "Now That I Have Implants, I Don't Have To Go To The Dentist Anymore"

Price Shopping & Dental Tourism: The Good, The Bad, & The Ugly. How To Choose A Doctor / Office

How Much Does This Cost, & Can I Finance It?

One-Stop Shopping: No Referrals Needed.

Appendix A: Testimonial

Appendix B: Parts & Pieces

Appendix C: Alternatives: Dentures & Other Implant Options

INTRODUCTION & DEFINITION

One of the most amazing developments in modern dentistry are dental implants. They have given people new leases on life by eliminating pain, embarrassment, endless cycles of repairs to natural teeth, and the like.

Dental implant solutions now exist where advanced problems can be reversed in just one appointment. These solutions are known as “Full Jaw Dental Implants (FJDI).” In a nutshell, 4 to 6 implants are placed and a brand new set of teeth are attached to the implants. People can walk out the door and immediately enjoy the benefits of solid, non-removable teeth! They can smile, chew, speak, and enjoy life instantaneously.

This eBook does not cover “the basics” about dental implants (please refer to our other eBook, “Everything You’ve Wanted To Know About Dental Implants” for that topic). Instead, this eBook has been designed to cover a specific implant procedure known as “Full Jaw Dental Implants” (FJDI).

INTENDED AUDIENCE

This e-Book is intended for people who find themselves in the need of advanced dental implant care. Are you one of them? This checklist may help you make that determination. Do you:

- Suffer from generalized unhappiness or depression with your current dental status? Are you unable to eat well, don’t smile, cover your mouth with your hands or moustaches, don’t go out with friends and family, or avoid certain foods? Do you feel the quality of your life has been compromised?
- Suffer from advanced gum disease and/or teeth problems? Examples include: loose teeth, loss of teeth, gum infections, pain, and extensive cavities.
- Suffer from generalized mouth pain?
- Develop cavities over and over, and are caught in an endless cycle of fillings, root canals, crowns, bridges, and extractions?
- Have chipped and damaged teeth?
- Wear dentures, and are dealing with loose, uncomfortable plates? Are you dependent upon adhesives to keep them in place?



THE INTERNET

The internet is filled with a wealth of information, but it is also clouded with marketing. Through the years I've seen patient after patient come to me with confusion and frustration. They have been overloaded with data and opinions accumulated from various internet sources, friends & family, coworkers, and other healthcare professionals. What I've attempted to do with this eBook is provide the reader with one convenient location where they can find answer to their questions, and even address topics they might not have thought of.

My goal is to help provide some clarity and guidance. When you're done with this e-book, give us a call and schedule your own personal consultation with us: you'll be glad you did!



Sincerely,

Ira Goldberg, DDS, FAGD, DICOI

Diplomate of the American Board of Oral Implantology / Implant Dentistry

Fellow of the American Academy of Implant Dentistry

Diplomat of the International Congress of Oral Implantologists

Scholar of the Dawson Academy of Comprehensive Dentistry

President: Northeast District of the American Academy of Implant Dentistry

WHAT QUALIFIES DR. GOLDBERG TO WRITE THIS E-BOOK

Dr. Goldberg is an expert in the field of Dental Implantology. The word “expert” is defined as “a person who has a comprehensive and authoritative knowledge of or skill in a particular area.” He has been involved in dentistry for over 23 years, and just as many with Implant Dentistry. The majority of his practice is dedicated to Implant Dentistry. He teaches Implant Dentistry to other dentists, and takes countless hours of continuing education to advance his knowledge in this ever-changing discipline. He holds multiple advanced credentials, one of which is held by only a few hundred dentists worldwide. He performs all the procedures described within this e-book. More details about his background can be found here <http://www.morriscountydentist.com/dental-services-procedures/dental-implants/dr-goldbergs-implant-training/>

THE AMERICAN BOARD OF ORAL IMPLANTOLOGY / IMPLANT DENTISTRY

Dr. Goldberg is a Diplomate of the American Board of Oral Implantology / Implant Dentistry. In order to become a Diplomate of this Board, he had to take a rigorous two day examination. Click here <http://www.aboi.org/> to learn more. If you have your dental implants attended to by a Diplomate of the ABOI, you can rest assured you're in very competent hands.

TESTIMONIALS

Dr. Goldberg is extremely well respected not only for his implant talents, but also as a caring & compassionate doctor. Below is one testimonial, but please review Appendix A for a few additional and pertinent comments from other patients, technicians, and doctors. Of course you can peruse the web for additional comments and accolades.

"As a board certified practicing Prosthodontist specializing in dental implant reconstruction, with an in-depth involvement in research and academics for forty-five years, I have had the opportunity to interface with thousands of clinicians interested in advancing their clinical skills in dental implant therapy. Dr. Ira Goldberg stands out among many I have mentored for his quick grasp of clinical proficiency in implant reconstruction. In addition, I have observed a keen drive for perfection, extraordinary organizational skills and a very genuine manifestation of compassion for his patients. His range of experience includes not only perfectly placed single tooth implants, but also a mastering of the ALL ON 4® treatment concept, allowing patients to choose a full arch of non-removable implant supported teeth over a removable denture. I have full confidence that Dr. Ira Goldberg can provide scientifically based implant treatment for any individual suffering with tooth loss and desiring permanent tooth replacement."

Thomas J. Balshi, DDS, PhD, FACP
Department of Implant Prosthodontics
Nova Southeastern University
Fort Lauderdale, Florida

DENTAL IMPLANTS ARE NOT A SPECIALTY

Many people think that dental implants are a specialty, and can only be performed by a dental implant specialist. This is incorrect, particularly because there is no such thing as an implant specialist. Any dentist can place and restore dental implants if they wish, regardless of their training.

Due to complicated politics, it may be a long time until dental implants are recognized as a specialty. Until that time comes, it is important for the consumer to carefully research the doctors they are considering working with.

Why is it so important to have an experienced Implantologist care for your implant needs? Here are two reasons:

- Comprehensive Understanding: A trained Implantologist knows how to look at multiple factors for a successful outcome: he or she understands you can't look at just the surgical component without understanding the restorative component. What good does it do to place implants just to find out they were placed in the wrong location?
- Options: How well do you think a surgeon understands the latest restorative options, and how well do you think a restorative dentist understands the latest surgical options? More than once people have presented to Dr. Goldberg for a second or third opinion, and he discussed solutions that were never mentioned before.
 - Please note this is not an attempt to discredit other surgeons or dentists: there are many excellent practitioners performing implant procedures. However, Dr. Goldberg does get to see a lot of completed procedures and suggested treatments that could have been handled better.



NJ STATE BOARD OF DENTISTRY ADVERTISING REGULATIONS

In order to satisfy the following rule (N.J.A.C. 13:30-6.2-i), please be advised that Dr. Goldberg is a general dentist. Dental implants are not a recognized dental specialty. Dr. Goldberg holds the following distinctions:

- Diplomate – American Board of Oral Implantology / Implant Dentistry
- Diplomat - International Congress of Oral Implantologists
- Fellow - American Association of Implant Dentistry
- Fellow – Academy of General Dentistry.
- Scholar – Dawson Academy of Comprehensive Dentistry

FULL JAW DENTAL IMPLANT SOLUTIONS (FJDIS): WHAT ON EARTH ARE YOU TALKING ABOUT?

The details of this revolutionary, amazing procedure are described in the following section, but we term this process as a “Full Jaw Dental Implant Solution (FJDIS).” A “jaw” refers to the upper or lower set of teeth. If a person requires care for both the upper and lower teeth, we are referring to two jaws.

A number of years ago, a dental implant company termed this process “All-On-Four®.” Even though the number “four” is part of the name, the process can include 4, 5, or 6 implants. The process has been so successful and revolutionary to the field of dentistry that other implant companies and individuals have come up with their own versions and names for the concept. Some of these names include:

All-On-Four®

Teeth-In-A-Day®

Teeth Tomorrow®

Hybridge®

Teeth Express®

Neo-Arch®

Pro-Arch®

RevitaliZe®



THE PROCESS EXPLAINED....

Please review the “Intended Audience” section above for the type of person this procedure is appropriate for.

Everybody’s particular situation will vary from detail to detail, but in a nutshell, here is the typical process:

1. Consultation: When you meet with Dr. Goldberg for the first time, you will have an opportunity to discuss your concerns and goals. He will perform a general evaluation of your mouth, and take a 3-D scan. He will review the general findings with you, and discuss options. If a Full Jaw Dental Implant Solution is appropriate, he will review the process, details, advantages & disadvantages, and answer your questions.
2. Your second appointment will consist of a detailed examination and data-collection process.
3. As long as no preliminary treatment is required, the third appointment will be the actual procedure. Any remaining teeth in the jaw will be removed, the appropriate number of implants will be placed, and temporary teeth will be affixed to the implants.
4. After approximately 12 weeks of healing, a few more appointments will be required to fabricate your final teeth.

That’s it! Years of problem are corrected in just a few visits, and you’re back up & running very quickly. Unlike traditional dentistry that can take many, many appointments and still leave you with an outcome that might fail or require significant repair within years, a full jaw implant solution takes only a handful of appointments and has a 97% success rate after 10 years!



IS THERE PAIN?

Understandably, this is a very common question. Most patients experience a very minimal amount of discomfort. When interviewed by Dr. Goldberg and his staff, most patients rate the discomfort a “1-3” on a scale of “1-10.” Patients may use a narcotic pain prescription for one day, but that’s about it.

MARY’S STORY....

Sometimes the best way to explain something is with a real-life story...

Mary (real name withheld) came to Dr. Goldberg for a fourth opinion. Her sister brought her since Mary really didn’t leave the house anymore on her own, due to the embarrassment and depression of her missing teeth and overall dental pain.

Through the years, Mary went to her dentist every 4 months for cleanings due to gum disease. Regardless, Mary regularly developed cavities which became more and more complicated to fix, and she started requiring root canals and extractions. About 2 years ago she had the remaining 5 lower teeth removed and a lower denture was made. Some of the upper teeth were uneven, chipped, and had cavities, ranging from mild (shallow) to severe (deep). One had a failing root canal, while the remaining ones were problem free.

Mary was very unhappy with the denture: it moved around in her mouth, it hurt, and she couldn’t eat well. Her dentist became frustrated with her complaints, and was unable to help her. She went to another office where the dentist remade the denture, but the exact same problems persisted.

From there, she saw a third dentist who offered some implant options: one was the placement of a few implants to stabilize the denture, and another was a permanent implant option where the teeth didn’t have to be removed. Mary was mostly interested in the non-removable option (exactly what is being discussed in this e-Book). However, she didn’t like the fact she would have to have the surgery performed by one office, and the final teeth fabricated by a second office.

Mary (actually, Mary’s sister) found Dr. Goldberg and the two of them came in for a consultation. What impressed both Mary and Mary’s sister was not only did Dr. Goldberg

perform all the work himself (no referrals to other offices), but he was more comprehensive than the other doctors: he pointed out how her pain and chewing problems wouldn't go away unless she addressed the upper teeth, also! The other three dentists failed to notice that the infections and poorly aligned upper teeth would not work properly against any correction of the lower problem. Furthermore, Dr. Goldberg also discussed two topics that weren't addressed in the other offices: 1) Options (implants, dentures, a mixture of these two, bridges and crowns), and 2) What to expect in the future for maintenance of the implants and teeth.

Mary decided to move forward with a lower full jaw implant solution, followed by the same for the upper jaw a few months after the lower was completed. Her second appointment with Dr. Goldberg was for a comprehensive evaluation and record-taking process.

At the third appointment, Dr. Goldberg performed the procedure, and Mary walked out the door with a new set of lower teeth! That evening she was able to eat a solid dinner and enjoy a new smile (although these were just the lower teeth). Years of dental problems were eliminated in just 3 appointments. And after she addressed the upper teeth, Mary now had a new lease on life: she began to smile, eat, socialize, and feel better about herself!

BONE GRAFTING

Traditional implant procedures oftentimes require the augmentation of a person's own jawbone. However, Full Jaw Dental Implant Solutions rarely require grafting. This is one major reason why people are attracted to these procedures: it shortens the treatment time, decreases the cost, and eliminates one or more additional surgeries.

For details regarding bone grafting, please refer to Dr. Goldberg's eBook, "Bone Grafting For Dental Implants."



MATERIAL OPTIONS

FJDIS can be fabricated from a number of different materials:

Conventional Full Acrylic:

A full acrylic restoration (teeth) should only be utilized for temporary teeth. It will be subjected to fracture. Dentures are typically made from full acrylic: both the base (the pink portion) and the teeth are acrylic. When exploring some of the less-expensive advertisements, be sure to ask what the final restoration is fabricated from, and if you want something stronger, is there an additional fee.

Pressed Full Acrylic:

Pressed acrylic is stronger than Conventional acrylic. Although still subject to fracture, it is denser so it can resist stains, odor accumulation, chipping, and fracture as compare to the Conventional acrylic. Also, the white teeth and pink gums are one solid piece (called “monolithic”), so teeth can’t pop off like Conventional FJDIS experience.

Reinforced Conventional Acrylic:

For years, this has been the standard. There is a metal bar that is screwed into the implants, and the bar is “wrapped” with the pink gum acrylic and the white acrylic teeth. Standard dentures are made from this acrylic. Although stronger than the previous option, this option has been falling out of favor due to: the amount of wear experienced by the teeth, the fact the acrylic is subject to chipping and fracture, the teeth can pop off depending on how the restoration is fabricated, and acrylic can pick up stain and odor more easily than the other options.

Reinforced Pressed Acrylic:

As described above, this type of acrylic is stronger than the conventional acrylic. The metal bar gives better strength to the overall appliance, and all the benefits of Pressed acrylic mentioned above apply.

Porcelain:

Porcelain teeth are more durable than the acrylic options, and at times, will look more natural. They won’t wear as quickly, are less prone to fracture, and are smoother than the acrylic so they won’t stain or pick up odors as easily. The cost will be higher than acrylic.

Zirconia:

Zirconia made a presence in the U.S. market about 10 years ago. Its “claim to fame” is that it doesn’t fracture. Although infrequent, there have been some fractures, but it is important to understand the fractures cannot be repaired. It is a very smooth and “glass-like” material, so it is very resistant to picking up stains, odors, and plaque. This option is the most expensive. Although Zirconia is not repairable, depending upon how the final set of teeth is made, the individual teeth can be replaced.

ADVANTAGES, DISADVANTAGES, & ALTERNATIVES TO FULL JAW DENTAL IMPLANT SOLUTIONS

There is no question that FJDIS change people's lives quickly, efficiently, and effectively. However, just like most things in life, there are pros, cons, and alternatives.

We've addressed the Advantages pretty well: correction of advanced & long-term dental problems quickly, elimination of periodontal (gum) disease, restoring people's self-confidence and happiness, improving chewing ability, giving back the roof of the mouth to denture wearers, stabilizing & eliminating loose dentures, providing non-removable teeth, restoring esthetics (whiter & straighter teeth), etc.

Disadvantages are not numerous, but may include:

- The psychological component of removing all of the teeth within a jaw
- The change of speech patterns when a person goes from natural teeth to temporary teeth, and then from temporary teeth to final teeth

Alternatives include:

- No Treatment: Although this may sound odd, you do have the right not to do anything!
- Partial Dentures: These are removable teeth (you take them out and put them in), that use remaining natural teeth to stay in place.
- Full Dentures: These are also removable teeth, but unlike the partial dentures, ALL of the remaining teeth in your jaw are removed.
- Other implant options: You can choose to have implants placed, whether they supplement remaining natural teeth or are the only anchors in your jaw. The teeth that will be placed are removable (taken in and out by you), as opposed to the FJDIS which is fixed (non-removable).
- Bridges are non-removable teeth that sit on top of natural teeth or implants. It is important to note that bridges require a solid foundation: if you plan on placing a bridge on natural teeth, those teeth should be free of periodontal (gum) disease and free of decay and infection.

Please refer to Appendix C for additional details regarding this topic.

MAINTENANCE & HOMECARE:

“NOW THAT I DON’T HAVE NATURAL TEETH, I DON’T HAVE TO GO TO THE DENTIST ANYMORE.”

I hear this incorrect belief all-too-often. The implants and restorations (teeth) must be monitored closely, especially in the beginning. Unlike natural teeth, implants do not have ligaments and nerve endings. Oftentimes there can be a problem, and you won't feel a thing! And if there is a problem, it can spread quickly. With FJDIS, we recommend you return to the dental office 4 times within the first year, 3 times in the second year, and then twice per year. These recommendations are only if everything is perfect: your homecare is ideal, our films and clinical exam show ideal maintenance, etc.

PRICE SHOPPING & DENTAL TOURISM:

THE GOOD, THE BAD, & THE UGLY.

HOW TO CHOOSE THE DOCTOR & OFFICE FOR YOUR TREATMENT.

FJDIS is a very competitive service offered throughout our region, the country, and they world. You will find countless locations to address your dental needs. What do you need to know? How do you choose a doctor?

Problems & maintenance:

By far, these are the most important issues you should consider BEFORE treatment commences. On multiple occasions I have had patients who live locally but had their treatment done elsewhere come to me with a concern. As stated before, implant patients do not know they have a problem until that problem is quite advanced. All of these patients required implant removal. A few of them required their procedure undergo complete revision (re-treatment). Some had poor work done from the start. Others had not gone for regular maintenance, and simple issues progressed quickly into serious problems. Figure out where you will have the maintenance performed and problems addressed BEFORE you select a treating facility. If you're OK with traveling to different

parts of the country or world for your maintenance and complication treatments, that's fine. But if you're not willing to, then consider the location of your treatment seriously.

Experience:

An experienced dentist and team is paramount to providing FJDIS. Be sure you are being treated by a doctor that has advanced implant training and has performed this service multiple times. Again, also ask about their maintenance protocols. Review his / her website, independent patient reviews, and perform your background checks. This is NOT a procedure to be performed and maintained by an inexperienced doctor and team!

Cost / Price:

I have seen this procedure advertised as low as \$15,000. This is very low. As a consumer, you need to ask questions: what brand of implant are you using (will that company be around in 10 years)? Does this included the final teeth, or just temporary teeth? What are the final teeth made of? What additional fees apply, or is the quoted fee all-inclusive? How experienced is the doctor and team? How many procedures have they performed, and how long have they been performing them?

Single or Multiple Offices:

This is one of the major reasons people come to Dr. Goldberg for their care (besides his experience): they do not want to bounce between offices, and they want one doctor to address the surgery and prosthetics (teeth), both now and in the future. There is nothing wrong with a team approach (two or more offices that a patient has to go to), but just be aware of this.



HOW MUCH DOES THIS COST, AND CAN I FINANCE MY INVESTMENT?

Full Jaw Dental Implant Solutions typically range between \$21,000 and \$31,000 per jaw. The range is due to the options you have in materials (discussed in another section). Oftentimes, the service can be half of what traditional dentistry may cost, and very few visits are needed as compared to traditional dentistry.

It is important not to think of the financials as a “cost,” but rather as an “investment.” By definition, an “investment” is an expenditure that has the potential to improve the future. A “cost” is simply an expenditure that affects the immediate timeframe. The investment of your time, money, and emotion into your dental care is with the intention of improving your overall health, chewing ability, smile, social interaction, and comfort.

The financial investment for a Full Jaw Dental Implant Solution is an all-inclusive number, with one exception. All of your extractions, implants, parts & pieces, temporary teeth, and final teeth are included. There is no nickel-and-diming. The only exception to this is sedation, and this is because not all patients request or require sedation.

Maintenance and repairs are also not included, but this is understood by most patients.

If you are not needing financing, 60% of the investment is due at the surgical phase, and the remaining 40% is due at the restorative phase (when your final teeth are made). In other words, we do not require the full amount upfront.

When financing is required, we have a number of options and partners for this type of dental care. Lending Club, HFS, and Care Credit are our most popular lenders. If you own your own home, home equity lines of credit are quite attractive. Of course, please consult your financial advisors for final decisions.

Because we perform so many implant procedures, we have a staff member who is very well-versed in financing options. Feel free to bring your questions and concerns with you to your free consultation!

ONE-STOP SHOPPING: NO REFERRALS NEEDED!

One of the biggest reasons people come to Dr. Goldberg for their implant needs is because most services can be performed by one doctor in one location. Referrals between offices are rarely required. He and his staff hear this on a daily basis.

Many general dentists or prosthodontists will work in tandem with surgeons, whether they be oral surgeons or periodontists. There is nothing wrong with this team approach, as long as patients are comfortable with seeing multiple doctors in multiple locations for their care.

One pitfall that occasionally occurs when patients are shuffled between offices is a lack of communication. The general dentist may want one thing, and the surgeon performs something different. It can also take a few preliminary visits between the offices before a treatment plan can be developed, with a variation in expectations, treatment time estimates, and financial estimates.

Due to the number of implant and implant related procedures Dr. Goldberg performs, he has invested greatly in technology & equipment. This further decreases the need for referrals to other offices.



APPENDIX A:

ADDITIONAL TESTIMONIALS

A “Thank You” letter to Dr. Goldberg from a lab technician who came to observe a Full-Jaw Implant Procedure:

Dear Dr. Goldberg,

I can’t thank you enough for so generously opening up your office and sharing this “All On Four” surgical procedure. The entire day was just unbelievable. As a dental laboratory owner, I have never observed a live dental surgery. You are truly a master. I did not want to miss a second of watching you so confidently and precisely extract teeth, place six implants, complete the conversion process of a denture into fixed teeth, stitch, and place the temporary screw-retained appliance. And finally, exchange an embrace with a very happy patient who just underwent hours of a serious dental procedure.

Your desire and willingness to share your knowledge is invaluable. It is obvious by the way you and your assistants worked together seamlessly throughout this at times, very intense procedure, like a well-oiled machine.

It did not go unnoticed how you and your team respect and count on the other member’s roles in the process, but also are capable of jumping in on other areas if necessary.

Gratefully,

Colleen Liddy, CDT, MDT
Owner, Impeccable Dental Design, Inc.
Scotch Plains, NJ

My daughter needed an implant in place of an abscessed tooth. My wife and I were very concerned about this and started an exhaustive search for the facility and a dentist that we trusted and that had an impeccable reputation. Ira Goldberg’s name continually surfaced. The clincher was when my dentist told me that she herself had only two cavities in her life and Ira Goldberg was the dentist she trusted to perform the fillings. This was one of the best decisions we ever made. Doctor Goldberg’s work was flawless.

Edward Card
Hamburg, NJ

APPENDIX A:

ADDITIONAL TESTIMONIALS CONT...

I am a retired medical doctor. I recognize superior dental/medical care, especially when I am the patient. I came to Dr. Ira Goldberg with many dental issues and I have been very happy with the professional level of treatment received. His extensive formal training and credentials are noted. Dr. Goldberg is an excellent surgeon and uses the latest state of the art technology and treatment. He pays attention to detail and the patient knows he cares. He has a congenial personality. Also, he explains what he is doing in a manner that the patient can understand. Dr. Goldberg is much aware of cosmetics as the artist he is. In addition, he is the most gentle dentist that I have ever encountered.

The office is modern, comfortable and very clean. The staff is very competent and caring. I highly recommend Dr. Ira Goldberg.

Dr. Robert Siegel, NJ

This doctor is phenomenal. Trust me. Never settles for anything less than the best treatment possible for his patients. Never had a dentist as talented and compassionate about dental care than Doc Goldberg. Truly amazing in what he does. Constantly pursuing perfection.

Bob F.
Blairstown, NJ

My review of Dr. Goldberg comes from a unique perspective. I recently retired from the Dental Laboratory industry. I have seen the work of hundreds of dentists. Dr. Goldberg ranks in the top 3. This includes some that practice in Downtown Manhattan and charge 2 ½ times what he does. He pays an amazing amount of attention to detail, which is exactly what you want in your dentist. I know people that have traveled 1.5 hours to use him as their dentist. Well worth the effort!!

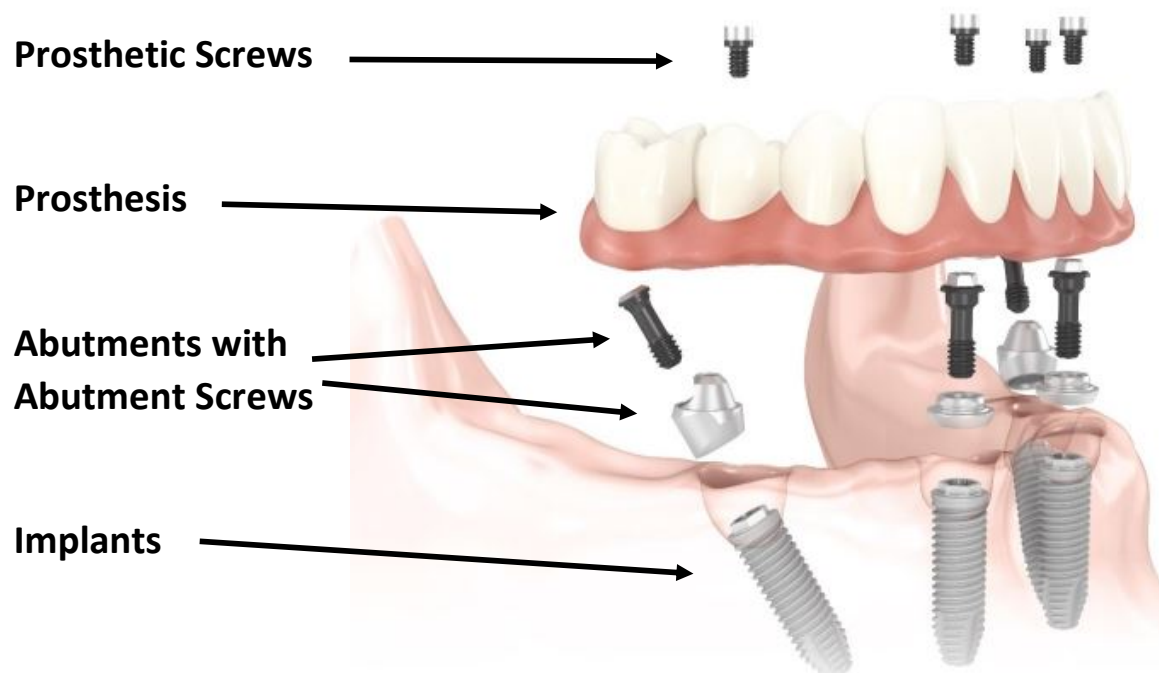
Al Waitzel, CDT - retired
Owner, A. Mark Dental Lab
Fair Lawn, NJ

APPENDIX B:

ILLUSTRATIONS AND PART & PIECES

This section may not be of interest to everyone, but for those who wish to know, here are some details:

1. Implants: 4 to 6 implants are placed. Sometimes they are in a vertical position, and sometimes they are angled.
2. Abutments: These are parts that connect the implants to the prosthesis (teeth).
3. Abutment screws: These are the screws that hold the Abutments in place.
4. Prosthesis: This is a fancy term for the teeth.
5. Prosthetic Screws: These are the screws that attach the prosthesis to the abutments.



APPENDIX C:

DENTURES & OTHER IMPLANT OPTIONS

Many years ago, the only option people had for failing and missing teeth were dentures. Implants were not a well-known option. Over the last few decades, dental implants have proven to change people's lives by being able to offer them a myriad of options. In this section, we will explore those options.

TERMS & DEFINITIONS

Arch: An arch is your upper jaw or lower jaw. If you are considering treatment for both the upper and lower jaws, you are discussing two arches.

Denture: a removable appliance that replaces missing teeth. These are the type of teeth you “take out at night and put into a glass of water.”

Partial Denture: A type of denture where one or more of your natural teeth remain in your mouth.

Full Denture: A type of denture but compared to a partial denture, ALL of the teeth are not present or removed.

Overdenture: A type of full denture that sits over dental implants.

Bridge: People will sometimes erroneously interchange the term “bridge” with “denture.” This is incorrect, and can lead to confusion. A denture is REMOVABLE: this appliance CAN be taken in and out by the patient. A bridge is PERMANENT: this appliance CANNOT be taken in and out by the patient.

- Another point to make about a bridge is that it can be connected to implants or natural teeth.

Retention: How well the denture will stay in position in the mouth, and resist movement.

REMOVABLE PARTIAL DENTURES

Partial dentures are removable appliances that are held in place with hooks and clasps.

Appropriate For:

- Patients who will be keeping a number of their teeth.
- Patients who don't mind having removable teeth.
- Finances are limited.

Advantages:

- Low Cost

Disadvantages:

- Esthetics may be compromised due to hooks, clasps, and color mis-matches between natural teeth and denture teeth.
- Abutment teeth (teeth that will be clasped) can become weakened & damaged.
- Bone loss may be accelerated in the regions where there are no teeth or implants.
- The chewing power is weak (stronger than a full denture, but not as strong as natural teeth or implants).
- The appliance has to be taken in-and-out of the mouth to clean and at night.

REMOVABLE FULL / COMPLETE DENTURES

Full dentures, also known as complete dentures, are removable appliances that sit on a patient's gums and on the roof of the mouth.

Appropriate for:

- Patients who will not be keeping any of their teeth in a given arch, or are already without those teeth.
- Patients who don't mind having removable teeth.
- Finances are limited.

Advantages:

- Low cost.

Disadvantages:

- The dentures may be loose, move around in the mouth, become sore, and require adhesives / glues.
- Chewing power / strength is weak.
- The upper denture oftentimes covers the roof of the mouth, and affects taste.
- Bone loss may be accelerated in the regions where there are no teeth or implants.
- Depending what is opposing the full denture, bone loss may be accelerated even faster.
- The appliance has to be taken in-and-out of the mouth to clean and at night.

OVERDENTURES

Overdentures are dentures (either partial dentures or full dentures) that sit OVER implants, and are connected to them. By definition, these are still dentures, and must be removed to clean after eating and at night.

The use of dental implants in conjunction with partial dentures provides the wearer additional security and less movement. The hooks and clasps can stress the remaining teeth, and implants can help to alleviate some of these undesirable forces.

The use of dental implants in conjunction with full dentures provides the wearer added security, limiting the amount of movement and discomfort accompanying that movement. In some situations, the patient might also be fortunate enough to not have the roof of their mouth covered by the acrylic.

Regardless of the type of overdenture (partial or full), chewing efficiency is improved, as well as the retention (how well they stay in place).

THE 2-IMPLANT OVERDENTURE

In the case of the 2-Implant Overdenture, there are two implants that help to hold the denture in place. If you already have an existing denture, there is a good chance you can reuse that denture, which will save you money. It is important to note that this appliance will not provide you with better biting force, but simply helps to keep the denture from moving around in your mouth. Sore gums, often experienced with full dentures, are also a risk. Furthermore, two implants are appropriate only for the lower jaw, not the upper jaw.



Appropriate for:

- Patients who will not be keeping any of their teeth in a given arch, or are already without those teeth.
- Patients who don't mind having removable teeth.
- Finances are limited.

Advantages:

- Low cost.
- Improved denture retention when compared to full dentures without implants.

Disadvantages:

- Bone loss may be accelerated in the regions where there are no teeth or implants.
- Bite strength is not improved over a full denture without implants.
- Denture movement will still be felt, especially when chewing and eating.
- A temporary denture may be necessary during the treatment process, in addition to the final denture.

THE 4-IMPLANT OVERDENTURE

As one might imagine, 4 implants will provide more retention of the full, removable denture. The patient will also experience a slight amount of increased bite force and less denture movement. All the advantages & disadvantages of the 2-implant overdenture still apply.



*Ready to look younger,
enjoy smiling & eating
your favorite foods
again?*



SCHEDULE YOUR APPOINTMENT TODAY!



**Morris County
Dental Associates, LLC**
Experience, Compassion & Quality

Morris County Dental Associates, LLC
Ira Goldberg, DDS, FAGD, DICOI

15 Commerce Blvd, Suite 201
Succasunna, NJ 07876

(973) 328-1225

WWW.MORRISCOUNTYDENTIST.COM